|  |   |                                   |                       |                          |                |                  |            | 09/909809           |                        |            |                            |                        |  |  |
|--|---|-----------------------------------|-----------------------|--------------------------|----------------|------------------|------------|---------------------|------------------------|------------|----------------------------|------------------------|--|--|
| 10   | PATENT APPLICATION FEE DETERMINATION RECORD  Application or Docket Number   |                                   |                       |                          |                |                  |            |                     |                        |            |                            | nber                   |  |  |
| _  | Effective October 1, 2000   |                                   |                       |                          |                |                  |            | 522 192423          |                        |            |                            |                        |  |  |
|  | CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                                   |                       |                          |                |                  |            | SMALL E             | NTITY                  | OR         | OTHER THAN<br>SMALL ENTITY |                        |  |  |
| π  | OTAL CLAIMS   | 3                                 |                       |                          |                |                  | RATE       | FEE                 | 7                      | RATE       | FEE                        |                        |  |  |
| FOR  |   |                                   | · NUMBER FILED        |                          | NUMBER EXTRA   |                  |            | BASIC FE            | 355.00                 | OR         | BASIC FEE                  |                        |  |  |
| TOTAL CHARGEABLE CLAIMS  |   |                                   | 3 minus 20∞           |                          | . 0            |                  |            | X\$ 9≈              |                        | OR         | X\$18=                     |                        |  |  |
| INDEPENDENT CLAIMS   |   |                                   | 2 minus 3 =           |                          | O              |                  |            | X40=                |                        | OR         | X80-                       |                        |  |  |
| MAL  | LTIPLE DEPE   | IDENT CLAIM P                     | RESENT                |                          |                | 135              |            |                     |                        | OR         | +270=                      |                        |  |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |                                   |                       |                          |                | į                | TOTAL      | <del> </del>        | OR                     | TOTAL      | 710                        |                        |  |  |
| CLAIMS AS AMENDED - PART II  |   |                                   |                       |                          |                |                  | OTHER THAN |                     |                        |            |                            |                        |  |  |
|  |   | (Column 1)<br>CLAIMS              |                       | (Cotur                   |                | (Column 3)       |            | SMALL               |                        | OR         | SMALL                      | ENTITY                 |  |  |
| AMENDMENTA   |   | REMAINING<br>AFTER<br>AMENDMENT   |                       | PAID                     | OUSLY<br>FOR   | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |
| S.   | Total   | .3                                | Minus                 | <del>-</del>             | ٥              | 7)               |            | X\$ 9=              |                        | OR         | X\$18=                     |                        |  |  |
| Ŧ  | FIRST PRESENTATION OF MULTIS  |                                   | Minus<br>II TIPI E DE |                          |                |                  |            | X40=                |                        | OR         | X80=                       |                        |  |  |
|  |   |                                   |                       |                          | -              |                  | '          | +135=               |                        | OR         | +270=                      |                        |  |  |
|  | M ALA   | •                                 |                       |                          |                |                  |            | YOTAL<br>MODIT, FEE |                        | OR         | TOTAL<br>ADDIT, FEE        |                        |  |  |
| 占  | 17-04   | (Column 1)                        |                       | (Colun                   |                | (Column 3)       |            |                     |                        |            |                            |                        |  |  |
| AMENDMENT B  |   | REMAINING<br>AFTER<br>AMENDMENT   |                       | NUM<br>PREVIO<br>PAID    | BEA<br>SUSLY , | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |            | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |
| Š  | Total   | · 3                               | Minus                 | -2                       | <u>g</u>       |                  | H          | X\$ 9=              | 1                      | ОÀ         | X\$18=                     |                        |  |  |
| ₹  |   | IRST PRESENTATION OF MULTIPLE DEP |                       | FNDENT                   | -              | ļΓ               | X40=       |                     | OR                     | X80=       |                            |                        |  |  |
|  | The state of much te dependent coam   |                                   |                       |                          |                |                  | <b>'</b> [ | +135=               |                        | OR         | +270=                      |                        |  |  |
|  | الم   | )                                 |                       |                          |                | ٠                |            | YOTAL<br>DDIT. FEE  | •                      | OR         | YOYAL<br>ADDIT. FEE        |                        |  |  |
| $\widetilde{\Pi}$  |   | (Column 1)<br>CLAIMS              |                       | (Colum                   |                | (Column 3)       | ) _        |                     |                        |            | ·                          |                        |  |  |
| AMENDMENT C  |   | Remaining<br>After<br>Amendment   |                       | NUME<br>PREVIO<br>PAID F | USLY           | PRESENT<br>EXTRA |            | -RATE               | ADDI-<br>TIONAL<br>FEE | 7          | RATE                       | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total   | · 5                               | Minus                 | -2                       | 0              | •                |            | xz6=                |                        | OR         | <b>X\$18</b> =             | •                      |  |  |
| ₹  | Independent<br>FIRST PRESE  | NTATION OF MI                     | Minus<br>LTIPLE OF    | FNOENT                   | 3<br>24N       | 4                |            | X40=                |                        | OR         | X802                       |                        |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                   |                       |                          |                |                  |            |                     | 7                      | <b>Q</b> A | +270=                      | $\overline{}$          |  |  |
| 11   | <ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> <li>If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 20, enter "20."</li> </ul> |                                   |                       |                          |                |                  |            | +135=<br>101AL      |                        |            | TOTAL                      | -70                    |  |  |
|  | The "Highest Number Previously Paid For" (Total or Independent) is the highest number bund in the appropriate box in column 1.  |                                   |                       |                          |                |                  |            |                     |                        |            |                            |                        |  |  |
|  | OFW PTO-475  Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  IN 650)  |                                   |                       |                          |                |                  |            |                     |                        |            |                            |                        |  |  |

TLS. GPG: 2000-460-703200100

Next

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

|  |  |                                      |  |                        | <del></del>       |               |                               |                        | 1/0         | 1099                       | 809                    |
|--|--|--------------------------------------|--|------------------------|-------------------|---------------|-------------------------------|------------------------|-------------|----------------------------|------------------------|
|  | CLAIMS   | <b>D - PART</b> (<br>mn 1)           | -                                      | lumn 2)                |                   | SMALL<br>TYPE | ENTITY                        | OR                     |             | OTHER THAN<br>SMALL ENTITY |                        |
| TOTAL CLA  | IMS  | -                                    |  |                        |                   |               | RATE                          | FEE                    |             | RATE                       | FEE                    |
| FOR  |  | NUMBE                                | NUMBER FILED                           |                        | NUMBER EXTRA      |               | BASIC F                       |                        | OR          |                            |                        |
| TOTAL CHAF   | RGEABLE CLAIMS   | r                                    | ninus 20=                              | *                      |                   | † †           | X\$                           |                        | $\exists$   | <b> </b>                   | <del>  *</del>         |
| INDEPENDEN   | NT CLAIMS  |                                      | minus 3 =                              | *                      |                   |               | X                             |                        | OR          |                            | -                      |
| MULTIPLE DE  | EPENDENT CLAIM I   |                                      |  |                        |                   | -             |                               |                        | OR          | X,                         | <del> </del>           |
| * If the differe   | ence in column 1 i   | is less than                         | zaro enter                             | "O" in                 | solumn 2          | 'L            | +5                            |                        | OR          | .+-                        |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                                      |  |                        |                   |               | TOTAL                         | - L                    | OR          |                            |                        |
| 10/24  | (C) (Splumn 1)   |                                      | MENDED - PART II (Column 2) (Column 3) |                        |                   |               | SMALI                         | L ENTITY               | OR          |                            | THAN<br>ENTITY         |
| AENT   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                |                                      | HIGHE<br>NUMB<br>PREVIO<br>PAID F      | BER<br>DUSLY           | PRESENT<br>EXTRA  |               | RATE                          | ADDI-<br>TIONAI<br>FEE |             | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total Independe  | .6   | Minus                                | 1.0                                    | <u>Š</u>               |                   |               | <del>X\$</del> - :            |                        | SQP.        | X\$18=                     | <u> </u>               |
| Independe<br>FIRST PR  | RESENTATION OF M   | Minus                                | ***                                    | 3                      | 1=4               |               | × _                           |                        | OR          | X84=                       |                        |
| 10   | ESENTATION OF W  | ULTIPLE DE                           | PENDENT                                | CLAIIVI                |                   | -             | +                             |                        | OR          | +280=                      |                        |
| 19   | · ·  |                                      | ÷.                                     |                        |                   | <b>L</b>      | TOTAL                         |                        |             | TOTAL<br>ADDIT FEE         |                        |
| 3/6/2  | (Column 1)   |                                      | (Colum                                 |                        | (Column 3)        |               | DI1. 1 C.                     | : <del></del>          |             | 1001-                      | <b></b>                |
| ENT  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                |                                      | HIGHE<br>NUMBE<br>PREVIOL<br>PAID FO   | BER<br>USLY            | PRESENT<br>EXTRA  |               | RATE                          | ADDI-<br>TIONAL<br>FEE |             | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total Independe  | . 6  | Minus                                | 1.3                                    | <u>)</u>               | [=(/)             | 13            | ***                           |                        | OR          | XS                         |                        |
| Independer   | ESENTATION OF MU   | Minus                                | PENDENT C                              | <u> </u>               |                   | ;             | X                             |                        | OR          | ×                          |                        |
| 111101111  | SENTATION OF THE   | JEHPE DE                             | PENUENT                                | LAtivi                 |                   | +             | . ·                           |                        | QR          | +                          |                        |
|  |  |                                      | 4                                      |                        |                   | ADE           | TOTAL<br>DIT. FEE             |                        | 1 D         | TOTAL<br>DDIT. FEE         | <del></del>            |
|  | (Column 1)   |                                      | . ·<br>(Column                         |                        | (Column 3)        | / No<br>1     | Л1. гъщ                       |                        | <b>≠</b> ,, | DD11.1 ===                 |                        |
| ENI (  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                                |                                      | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO  | ST<br>ER<br>ĮSLY       | PRESENT.<br>EXTRA | R             | RATE                          | ADDI-<br>TIONAL<br>FEE |             | RATE                       | ADDI-<br>TIONAL<br>FEE |
| Total Independen   | *  | Minus                                | ** 20                                  | $\overline{}$          | =                 | ×             | \$                            | <del></del>            | OR          | X\$                        |                        |
| Independen   |  | Minus                                | ***                                    |                        | =                 | X             |                               |                        |             | X                          |                        |
| FIRST PRE  | SENTATION OF MU  | JLTIPLE DEF                          | PENDENT C                              | LAIM                   |                   | -             |                               | <br> -<br> -           | OR _        | $\stackrel{\wedge}{-}$     |                        |
| * If the entry in o  | column 1 is less than the  | entry in colu                        | mn 2 write "0                          | <sup>ve io</sup> coli  | 2                 | +             |                               |                        | OR          | +                          |                        |
| ** If the "Highest i<br>***If the "Highest :                             | Number Previously Pai<br>Number Previously Pai<br>Number Previously Paid | aid For" IN THIS<br>aid For" IN THIS | S SPACE is le:<br>S SPACE is le        | ess than :<br>ess than | 20, enter "20."   | ADDI          | TOTAL<br>IT. FEE<br>I the app |                        |             | TOTAL DDIT. FEE            |                        |